Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
(Column 1) (Column 2)						mn 2)	TYPE				OR SMALL ENTITY	
TOTAL CLAIMS			17				RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	EE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			21. 7inus 20=		. 27		X\$ 9=	-		OR	X\$18=	486
INDEPENDENT CLAIMS			5 minus 3 =		. 7		X40=			OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT							+135=			OR	+270=	140
$^{\star}$ If the difference in column 1 is less than zero, enter "0" in						olumn 2	TOTA			OR	TOTAL	1351
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							LE	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	-		OR	X\$18=	
	Independent	*	Minus	***	F OL 4 194		X40=			OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. ]		OR	+270=	-
							TOT			OR	TOTAL	
		(Column 1)		(Colui	mn 2)	(Column 3)	ADDIT. F	: E <b>L</b>			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	1		OR	X\$18=	122
	Independent	*	Minus	***		=	X40=	1			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR		
										OR	+270=	
								EF		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X40=	+			X80=	
٩	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		740=	╁		OR	700=	
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pai					found in the	appr	opriate box	in col	umn 1.	